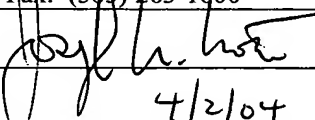
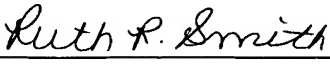




<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	10/658,953	
	Filing Date	September 10, 2003	
	First Named Inventor	Huwig	
	Group Art Unit	1614	
	Examiner Name	Unknown	
Total Number of Pages in This Submission	13	Attorney Docket Number	20959/2140 (P 63469)

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> A copy of the Notice to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input checked="" type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed, prepaid postcard for acknowledging receipt <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <input checked="" type="checkbox"/> Request for Correction of Inventorship <input checked="" type="checkbox"/> Statement of Carlo Bolis <input checked="" type="checkbox"/> Statement of Patrik Oehri on Behalf of Assignee Ivoclar Vivadent AG <input checked="" type="checkbox"/> Copy of Assignment from Carlo Bolis to Ivoclar Vivadent AG
Remarks		<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 14-1138 for the above identified docket number.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Joseph M. Noto Nixon Peabody LLP Clinton Square, P.O. Box 31051 Rochester, New York 14603-1051 Telephone: (585) 263-1601 Fax: (585) 263-1600
Signature	 Registration No. 32,163
Date	4/2/04

CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]	
I hereby certify that this correspondence is being:	
<input checked="" type="checkbox"/> deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop _____, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450	
<input type="checkbox"/> transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (703) _____	
Date	May 4, 2004
Signature	
Ruth R. Smith	
Typed or printed name	

**FEE TRANSMITTAL**  
MAY 06 2004 FOR FY 2004  
Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT		(S) 130	Complete if Known	
Application Number		10/658,953		
Filing Date		September 10, 2003		
First Named Inventor		Huwig		
Examiner Name		Unknown		
Art Unit		1614		
Attorney Docket No.		20959/2140 (P 63469)		

<p><b>METHOD OF PAYMENT</b> (check all that apply)</p> <p><input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None</p> <p><input type="checkbox"/> Deposit Account: Deposit Account Number: 14-1138 Deposit Account Name: Nixon Peabody LLP</p> <p>The Commissioner is authorized to: (check all that apply)</p> <p><input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments</p> <p><input checked="" type="checkbox"/> Charge any additional fee(s)</p> <p><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.</p> <p style="text-align: center;"><b>FEE CALCULATION</b></p> <p><b>1. BASIC FILING FEE</b></p> <table border="1" style="width: 100%;"> <thead> <tr> <th>Large Entity Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee Code</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>1001</td> <td>770</td> <td>2001</td> <td>385</td> <td>Utility filing fee</td> <td></td> </tr> <tr> <td>1002</td> <td>340</td> <td>2002</td> <td>170</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>1003</td> <td>530</td> <td>2003</td> <td>265</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>1004</td> <td>770</td> <td>2004</td> <td>385</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>1005</td> <td>160</td> <td>2005</td> <td>80</td> <td>Provisional filing fee</td> <td></td> </tr> <tr> <td colspan="5">SUBTOTAL (1)</td> <td>(S) 0</td> </tr> </tbody> </table> <p><b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b></p> <table border="1" style="width: 100%;"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>-20** =</td> <td>X</td> <td></td> <td>0</td> </tr> <tr> <td>Independent Claims -3** =</td> <td>X</td> <td></td> <td>0</td> </tr> <tr> <td>Multiple Dependent</td> <td>X</td> <td></td> <td>0</td> </tr> </tbody> </table> <table border="1" style="width: 100%;"> <thead> <tr> <th>Large Entity Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee Code</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr> <td>1202</td> <td>18</td> <td>2202</td> <td>9</td> <td>Claims in excess of 20</td> </tr> <tr> <td>1201</td> <td>86</td> <td>2201</td> <td>43</td> <td>Independent claims in excess of 3</td> </tr> <tr> <td>1203</td> <td>290</td> <td>2203</td> <td>145</td> <td>Multiple dependent claim, if not paid</td> </tr> <tr> <td>1204</td> <td>86</td> <td>2204</td> <td>43</td> <td>** Reissue independent claims over original patent</td> </tr> <tr> <td>1205</td> <td>18</td> <td>2205</td> <td>9</td> <td>** Reissue claims in excess of 20 and over original patent</td> </tr> <tr> <td colspan="5">SUBTOTAL (2) (S) 0</td> </tr> </tbody> </table> <p>**or number previously paid, if greater; For Reissues, see above</p>	Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid	1001	770	2001	385	Utility filing fee		1002	340	2002	170	Design filing fee		1003	530	2003	265	Plant filing fee		1004	770	2004	385	Reissue filing fee		1005	160	2005	80	Provisional filing fee		SUBTOTAL (1)					(S) 0	Total Claims	Extra Claims	Fee from below	Fee Paid	-20** =	X		0	Independent Claims -3** =	X		0	Multiple Dependent	X		0	Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	1202	18	2202	9	Claims in excess of 20	1201	86	2201	43	Independent claims in excess of 3	1203	290	2203	145	Multiple dependent claim, if not paid	1204	86	2204	43	** Reissue independent claims over original patent	1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	SUBTOTAL (2) (S) 0					<p><b>3. 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Smith</u></p>	Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	1051	130	2051	65	Surcharge - late filing fee or oath	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	1053	130	1053	130	Non-English specification	1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	1251	110	2251	55	Extension for reply within first month	1252	420	2252	210	Extension for reply within second month	1253	950	2253	475	Extension for reply within third month	1254	1,480	2254	740	Extension for reply within fourth month	1255	2,010	2255	1,005	Extension for reply within fifth month	1401	330	2401	165	Notice of Appeal	1402	330	2402	165	Filing a brief in support of an appeal	1403	290	2403	145	Request for oral hearing	1451	1,510	1451	1,510	Petition to institute a public use proceeding	1452	110	2452	55	Petition to revive - unavoidable	1453	1,330	2453	665	Petition to revive - unintentional	1501	1,330	2501	665	Utility issue fee (or reissue)	1502	480	2502	240	Design issue fee	1503	640	2503	320	Plant issue fee	1460	130	1460	130	Petitions to the Commissioner	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	1806	180	1806	180	Submission of Information Disclosure Stmt	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	1801	770	2801	385	Request for Continued Examination (RCE)	1802	900	1802	900	Request for expedited examination of a design application
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<b>SUBMITTED BY</b>		<b>Complete (if applicable)</b>	
Name (Print/Type)	Joseph M. Noto	Registration No. (Attorney/Agent)	32,163
Signature		Telephone	(585) 263-1601
		Date	4/2/04

SEND TO: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450



PATENT

Docket No.: 20959/2140 (P 63469)

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants	: Huwig et al.	)	Examiner:
		)	Unknown
Serial No.	: 10/658,953	)	
		)	Art Unit:
Cnfrm. No.	: 3518	)	1614
		)	
Filed	: September 10, 2003	)	
		)	
For	: ACID-CONTAINING DESENSITIZATION	)	
	AGENTS FOR TEETH	)	

REQUEST FOR CORRECTION OF INVENTORSHIP  
UNDER 37 C.F.R. § 1.48(a)

Mail Stop  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Dear Sir:

Pursuant to 37 C.F.R. § 1.48(a), applicants hereby request the addition of Carlo Bolis as co-inventor of the above-identified application. At the time of filing the above-identified application, Carlo Bolis was erroneously omitted as inventor. As set forth in the attached Statement of Carlo Bolis Under 37 C.F.R. § 1.48(a), such error was made without deceptive intent on the part of Carlo Bolis.

This request is accompanied by a declaration signed by all inventors, the written consent of the assignee Ivoclar Vivadent AG, and the requisite fee of \$130.00 as set forth in 37 C.F.R. § 1.17(i). Any additional fees may be charged to deposit account 14-1138.

05/07/2004 SZEWDIE1 00000032 10658953

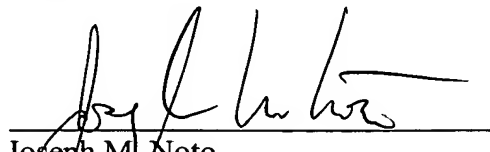
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Date:

4/2/04

Respectfully submitted,

  
Joseph M. Noto  
Registration No. 32,163  
Attorney for Applicant

Nixon Peabody LLP  
Clinton Square, P.O. Box 31051  
Rochester, New York 14603  
Telephone: (585) 263-1601  
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## Certificate of Mailing - 37 CFR 1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:  
Commissioner for Patents P.O. Box 1450  
Alexandria, VA 22313-1450, on the date below.

May 4, 2004   
Date Ruth R. Smith



PATENT  
Docket No.: 20959/2140 (P 63469)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants	:	Huwig et al.	)	Examiner:
			)	Unknown
Serial No.	:	10/658,953	)	
			)	
Cnfrm. No.	:	3518	)	Art Unit:
			)	1614
Filed	:	September 10, 2003	)	
			)	
For	:	ACID-CONTAINING DESENSITIZATION	)	
		AGENTS FOR TEETH	)	

STATEMENT OF CARLO BOLIS

Mail Stop  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Dear Sir:

I, CARLO BOLIS, hereby submit this statement in support of applicants' Request for Correction of Inventorship Under 37 C.F.R. § 1.48(a). At the time of filing the above-identified patent application, I was erroneously omitted as an inventor. This error arose without deceptive intent on my part.

Date: 24th March 2004

  
\_\_\_\_\_  
Carlo Bolis



PATENT  
Docket No.: 20959/2140 (P 63469)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants	:	Huwig et al.	)	Examiner:
Serial No.	:	10/658,953	)	Unknown
Cnfrm. No.	:	3518	)	
Filed	:	September 10, 2003	)	Art Unit:
For	:	ACID-CONTAINING DESENSITIZATION	)	1614
		AGENTS FOR TEETH	)	

STATEMENT OF \_\_\_\_\_,  
ON BEHALF OF ASSIGNEE IVOCCLAR VIVADENT AG

Mail Stop  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Dear Sir:

1. I, Patrik Oehri, am the Director F&E Services of Ivoclar Vivadent AG located at Bendererstrasse 2, FL-9494 Schaan, Liechtenstein and have the authority to act on behalf of Ivoclar Vivadent AG

2. As set forth in the assignment form (copy enclosed), the above-identified patent application has been assigned to Ivoclar Vivadent AG. It is my understanding that the assignment from Carlo Bolis to Ivoclar Vivadent AG will be filed in the U.S. Patent and Trademark Office together with this paper.

3. Ivoclar Vivadent AG hereby consents to the requested correction of inventorship as set forth in the accompanying Request for Correction of Inventorship under 37 C.F.R. § 1.48(a).

4. I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Date: 24th March 2004



Signature Patrik Oehri

Title Director F&E Services

Ivoclar Vivadent AG  
Bendererstrasse 2  
FL-9494 Schaan, Liechtenstein

MAY 06 2004

COMBINED DECLARATION FOR PATENT  
APPLICATION AND POWER OF ATTORNEY  
(Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

20959/2140 (P 63469)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**ACID-CONTAINING DESENSITIZATION AGENTS FOR TEETH**

the specification of which (check only one item below):

☐ is attached hereto.

☒ was filed as U.S. Patent Application Serial No. **10/658,953** on **September 10, 2003** and was amended on \_\_\_\_\_  
(if applicable).

☐ was filed as PCT International Application No. \_\_\_\_\_ on \_\_\_\_\_ and was amended under PCT Article 19 on \_\_\_\_\_  
(if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specifications, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

I hereby claim priority benefits under Title 35, United States Code, § 119 of any application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States listed below and have also identified below any application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

**PRIOR APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:**

COUNTRY (IF PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
Germany	102 45 212.1	27 September 2002	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT International filing date of this application:

**PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:**

U.S. APPLICATIONS		STATUS (Check One)		
U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDONED
PCT APPLICATIONS DESIGNATING THE U.S.				
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)		

**COMBINED DECLARATION FOR PATENT APPLICATION  
AND POWER OF ATTORNEY (Continue)**

**ATTORNEY'S DOCKET NUMBER**  
**20959/2140 (P 63469)**

**POWER OF ATTORNEY:** As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. **Michael L. Goldman, Registration No. 30,727; Joseph M. Noto, Registration No. 32,163; Gunnar G. Leinberg, Registration No. 35,584; Candice J. Clement, Registration No. 39,946; Edwin V. Merkel, Registration No. 40,087; Georgia Evans, Registration No. 44,597; Alice Y. Choi, Registration No. 45,758; Andrew K. Gonsalves, Registration No. 48,145; Noreen L. Connolly, Registration No. 48,987; John Campa, Registration No. 49,014**

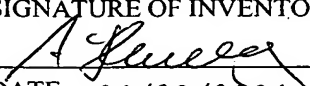
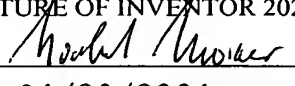
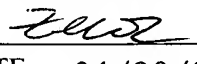
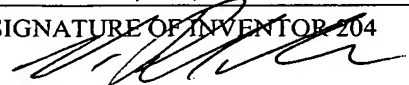
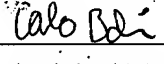
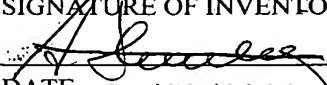
**Send Correspondence to:**  
**Joseph M. Noto**  
**NIXON PEABODY LLP**  
**Clinton Square, P.O. Box 31051**  
**Rochester, New York 14603**

**Direct Telephone Calls to:**  
**(name and telephone number)**  
**Joseph M. Noto**  
**(585) 263-1601**

2 0 1	FULL NAME OF INVENTOR	FAMILY NAME <b>Huwig</b>	FIRST GIVEN NAME <b>Alexander</b>	SECOND GIVEN NAME <b>Karl</b>
	RESIDENCE & CITIZENSHIP	CITY <b>Horgen</b>	STATE/FOREIGN COUNTRY <b>Switzerland</b>	COUNTRY OF CITIZENSHIP <b>Switzerland</b>
	POST OFFICE ADDRESS	P.O. ADDRESS <b>Einsiedlerstr. 402</b>	CITY <b>Horgen</b>	STATE & ZIP CODE/CTRY <b>CH-8810/Switzerland</b>
2 0 2	FULL NAME OF INVENTOR	FAMILY NAME <b>Moszner</b>	FIRST GIVEN NAME <b>Norbert</b>	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <b>Eschen</b>	STATE/FOREIGN COUNTRY <b>Liechtenstein</b>	COUNTRY OF CITIZENSHIP <b>Germany</b>
	POST OFFICE ADDRESS	P.O. ADDRESS <b>Eugen-Schafhauserstr. 20</b>	CITY <b>Eschen</b>	STATE & ZIP CODE/CTRY <b>FL-9492/Liechtenstein</b>
2 0 3	FULL NAME OF INVENTOR	FAMILY NAME <b>Zeuner</b>	FIRST GIVEN NAME <b>Frank</b>	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <b>Vaduz</b>	STATE/FOREIGN COUNTRY <b>Liechtenstein</b>	COUNTRY OF CITIZENSHIP <b>Germany</b>
	POST OFFICE ADDRESS	P.O. ADDRESS <b>Am Widagraba 7</b>	CITY <b>Vaduz</b>	STATE & ZIP CODE/CTRY <b>FL-9490/Liechtenstein</b>
2 0 4	FULL NAME OF INVENTOR	FAMILY NAME <b>Rheinberger</b>	FIRST GIVEN NAME <b>Volker</b>	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <b>Vaduz</b>	STATE/FOREIGN COUNTRY <b>Liechtenstein</b>	COUNTRY OF CITIZENSHIP <b>Liechtenstein</b>
	POST OFFICE ADDRESS	P.O. ADDRESS <b>Mareestr. 34</b>	CITY <b>Vaduz</b>	STATE & ZIP CODE/CTRY <b>FL-9490/Liechtenstein</b>
2 0 5	FULL NAME OF INVENTOR	FAMILY NAME <b>Bolis</b>	FIRST GIVEN NAME <b>Carlo</b>	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <b>Chur</b>	STATE/FOREIGN COUNTRY <b>Switzerland</b>	COUNTRY OF CITIZENSHIP <b>Switzerland</b>
	POST OFFICE ADDRESS	P.O. ADDRESS <b>Oberalpstr. 25</b>	CITY <b>Chur</b>	STATE & ZIP CODE/CTRY <b>CH-7000 Switzerland</b>
2 0 6	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE/FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	P.O. ADDRESS	CITY	STATE & ZIP CODE/CTRY



I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statement may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201 	SIGNATURE OF INVENTOR 202 	SIGNATURE OF INVENTOR 203 
DATE 04/20/2004	DATE 04/20/2004	DATE 04/20/2004
SIGNATURE OF INVENTOR 204 	SIGNATURE OF INVENTOR 205 	SIGNATURE OF INVENTOR 206 
DATE 04/20/2004	DATE 04/20/2004	DATE 04/20/2004

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COPY

ASSIGNMENT

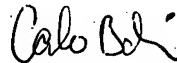
WHEREAS, I, **Carlo Bolis**, a citizen of Switzerland, residing at Oberalpstr. 25, CH-7000 Chur, Switzerland, have invented certain new and useful improvements in **ACID-CONTAINING DESENSITIZATION AGENTS FOR TEETH** for which I have executed an application for Letters Patent in the United States, filed as U.S. Serial No. 10/658,953 on September 10, 2003;

AND WHEREAS, **Ivoclar Vivadent AG**, with its principal place of business at Bendererstrasse 2, FL-9494 Schaan, Liechtenstein, desires to acquire the entire right, title and interest in and to the said improvements and the said Application:

NOW, THEREFORE, for good and valuable consideration, including salary or payment for the making of inventions, or employee benefits, the receipt of which is hereby acknowledged, we, the said inventors, do hereby acknowledge that I have sold, assigned, transferred and set over, and by these presents do hereby sell, assign, transfer and set over, unto the said **Ivoclar Vivadent AG**, its successors, legal representatives and assigns, the entire right, title and interest throughout the world in, to and under the said improvements, and the said application and all divisions, renewals and continuations thereof, and all Letters Patent of the United States which may be granted thereon and all reissues and extensions thereof, and all rights of priority under International Conventions and applications for Letters Patent which may hereafter be filed for said improvements in any country or countries foreign to the United States, and all Letters Patent which may be granted for said improvements in any country or countries foreign to the United States and all extensions, renewals and reissues thereof; and I hereby authorize and request the Commissioner of Patents of the United States, and any Official of any country or countries foreign to the United States, whose duty it is to issue patents on applications as aforesaid; to issue all Letters Patent for said improvements to the said **Ivoclar Vivadent AG**, its successors, legal representatives and assigns, in accordance with the terms of this instrument.

AND I HEREBY covenant and agree that I will communicate to the said **Ivoclar Vivadent AG**, its successors, legal representatives and assigns, any facts known to me respecting said improvements and testify in any legal proceeding, sign all lawful papers, execute all divisional, continuing and reissue applications, make all rightful oaths and generally do everything possible to aid the said **Ivoclar Vivadent AG**, its successors, legal representatives and assigns, to obtain and enforce proper patent protection for said improvements in all countries.

IN TESTIMONY WHEREOF,  
I hereunto set my hand and seal this 24th day of March, 2004.



Carlo Bolis

Witnessed:



Name Margot Retuga

Address Specki 20

FL 9494 Schaan

Date: 24th March 2004